Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number. Attorney Docket Number **DECLARATION FOR UTILITY OR** Bor Z Jang First Named Inventor **DESIGN COMPLETE IF KNOWN PATENT APPLICATION** (37 CFR 1.63) Application Number Filing Date Declaration Declaration Submitted after Initial OR Submitted Art Unit Filing (surcharge with Initial

	Filing	(37 CFR 1.16 (e)) required)	Examiner Name							
As the below named inventor, I hereby declare that:										
My residence, mailing address, and citizenship are as stated below next to my name.										
	I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:									
1	PHOTO-ELECTROLYTIC CATALYST SYSTEMS AND METHOD FOR HYDROGEN									
Ì	PRODUCTION FROM Y	WATER								
l		•								
L		(Title of the In	vention)							
tl	he specification of which	יוו פונו נט פונויו)	vertiony							
	X is attached hereto				:					
_	OR]							
	was filed on (MM/DD/YYYY)		as United States A	pplication Number	or PCT International					
	L				:					
Α	pplication Number	and was amende	d on (MM/DD/YYYY)		(if applicable).					
			L							
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.										
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.										
11	nereby claim foreign priority benefits	under 35 U.S.C. 119(a)-(d)	or (f), or 365(b) of any for	eign application(s)	for patent, inventor's or plant					
St	breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.									
	Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO					
Ĺ	Additional foreign application nu	mbers are listed on a supple	mental priority data sheet	PTO/SB/02B attacl	ned hereto:					

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

DECLARATION — Utility or Design Patent Application

Direct all correspondence to: Customer N				OR	X Corre	espondence address below			
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.									
NAME OF SOLE OR FIRST INVENTOR: A petition has been filed for this unsigned inventor									
Given Name (first and middle [if any])	or Z.			y Name rname	J	lang			
Inventor's Signature	3/2	20	3			Date 9/1/2003			
FARGO Residence: City		State N	ID .	Country	USA	Citizenship USA			
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NAME OF SECOND INVENTOR:		A petition	has beer	filed for th	is unsigne	ed inventor			
Given Name (first and middle [if any])	Family Name or Surname								
Inventor's Signature				Date					
Residence: City		State		Country		Citizenship			
Mailing Address									
		State		ZIP	•	Country			
City Additional inventors are being named on the	su	State pplemental Ac	ditional Inv	<u> </u>	t(s) PTO/SE	I/02A attached hereto.			